Signature

Based on PTO/SB/05

OMB 0651-0032

Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY **PATENT APPLICATION TRANSMITTAL**

01-606 Attorney Docket No. **WATABE** First Inventor or Application Identifier TIRE PNEUMATIC PRESSURE MONITORING SYSTEM တ်ထိ

Date

March 30, 2004

(Only for new nonprovision	nal applications under 37 (C.F.R.§ 1.53(b))	Expres	s Mail Label No.			8	
	PLICATION ELEME		Commissioner for Patents ADDRESS TO: Mail Stop Patent Application Alexandria, VA 22313-1450					
2. X Specificatio -Descriptive -Cross Refe -Background -Summary of -Brief Descriptive -Claims -Claims -Abstract of 3. X Drawing(s) (1) 4. Oath or Declaration a. X New b. Copy (for conditional or con	title of the Invention rence to Related Applic of of the Invention of the Invention of the Drawings escription of the Preferre the Disclosure	ations ations	ion, b).	6. Nucleotide a. (if applicable a. Con b. Pape c. Stat ACCOM 7. X Assign Assign Statem assigne) 9. Englisl 10. X Inform Statem 11. Prelim 12. X Return (should statem (PTOSE)	nd/or Amino A , all necessary nputer Readab er Copy (identice ement verifyin PANYING All ment Papers ee: DENSO C R.§ 3.73(b) ent (when there is a in Translation I ation Disclosu nent (IDS)/PTC inary Amendm Receipt Poste d be specifical i Entity nent(s) 309-12) ed Copy of Pric ign priority is c	ple Copy al to computer copy) g identity of above copies PPLICATION PARTS (cover sheet & document(s)) ORPORATION Power of Attorney Document (if applicable) Tre X Copies of IDS Citations The Copies	5	
☐ Continuation Prior application info For CONTINUATIO under Box 4b, is cor	Divisional Commation: Examiner N or DIVISIONAL APPS or sidered a part of the disclocan only be relied upon w	onlinuation-in-part (only: The entire dissure of the accomphen a portion has	sclosure of anying cont been Inadv	of prior application N f the prior application inuation or divisional vertently omitted froi ICE ADDRESS	Group/Art Unit	an oath or declaration is supplied by refere	oliod	
Address City			C(-)		Zin Codo	Γ		
Country		Telei	State ohone	(703) 707-9110	Zip Code Fax	(703) 707-9112		
Name (Print/type	DAVID G. POSZ			Registration No. (Attorney/Agent) 37,701				

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Mail Stop Patent Application, Arlington, VA 22202.

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are

FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant Claims small TOTAL AMOUNT OF PAYMEN

Signature

enuty sta	atus.	See 3	/ CFR
IT	(\$)	810)

required to respond to a cont	ection of information unless it displays a valid OMB control number
	Complete if Known
Application Number	
Filing Date	March 30, 2004
First Named Inventor	WATABE
Examiner Name	
Art Unit	
Attorney Docket No.	01-606

METHOD OF PAYMENT (check all that apply)			FEE CALCULATION (continued)											
Check Credit card Money Other None		3. ADDITIONAL FEES Large Entity Small Entity Fee Fee Fee Fee												
Deposit Ccount Deposit		Code	(\$)	Code	(\$)	Fee Description			Fee Paid					
Account Number 50-1147		1051	130	2051	65	Surcharge – late filing	fee or oath							
Deposit	OSZ	& B	BETHAR	DS,	PLC	1052	50	2052	25	Surcharge – late provi cover sheet	sional filing fee o	or		
The Commissioner is authorized to: (check all that apply)		1053	130	1053	130	Non-English specificat	tion							
Charge fee(s) indicated below Credit any overpayments		1812	2,520	1812	2,520	For filing a request for	ex parte reexam	nination						
X Charge any	addition	al fee(s) o	during the pende	ency of this	application	1804	920*	1804	920*	Requesting publication Examiner action	of SIR prior to			
Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account.		1805	1,840*	1805	1,840*	Requesting publication Examiner action	n of SIR after							
	FE	E CA	LCULATIO	N		1251	110	2251	55	Extension for reply wit	hin first month			
1. BASIC FIL	LING	EE				1252	420	2252	210	Extension for reply wit	hin second mont	th		
Large Entity	Small	Entity				1253	950	2253	475	Extension for reply wit	hin third month			
	Fee Code	Fee	Fee Descri	iption	Con Doid	1254	1,480	2254	740	Extension for reply wit		1		
1001 770	2001	(\$) 385	Utility filing fo	ee [Fee Paid 770	1255	2,010	2255	1005	Extension for reply wit		•		
1002 340	2002	170	Design filing	}		1401	330	2401	165	Notice of Appeal				
1003 530	2003	265	Plant filing fe	ł		1402	330	2402	165	Filing a brief in suppor	t of an appeal			
1004 770	2004	385	Reissue filing	ł	-	1403	290	2403	145	Request for oral hearing				
	2005	80	Provisional fil	- }		1451	1,510	1451	1,510	Petition to institute a p	-	edina		
1000 100 2000 BO 1 TOVISIONES TIME GIVE		1452	110	2452	55	Petition to revive – una	•	Jung	-					
SUBTOTAL (1) (\$) 770		1453	1,330	2453	665	Petition to revive - uni	ntentional							
SUBTOTAL (1) (\$) 770 2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE			1501	1,330	2501	665	Utility issue fee (or reis			<u> </u>				
Fee from			1502	480	2502	240	Design issue fee	,		\vdash				
Total Claims 5 -20**= 0 x 18 = 0			1503	640	2502	320	Plant issue fee							
Independent		··-= -	- 			1460	130	1460	130	Petitions to the Comm	issioner			
Claims 1 0 00					1807	50	1807							
Muliple Dependent					50	Processing fee under								
Large Entity Small Entity Fee Fee Fee Fee Fee Description		1806 8021	180 40	1806 8021	180	Submission of Informa								
Code (\$) 1202 18	Code 2202	(\$)	Claims in ex		0	1809	770	2809	40 385	Recording each patern property (times number Filing a submission aft	of properties)		40	
1201 86	2201	43	Independent	claims in	excess of 3	1810	770	2810	385	(37 CFR § 1.129(a)) For each additional invexamined (37 CFR § 1				
1203 290	2203	145	Multiple depe	endent da	im, if not paid	1801	770	2801	385	Request for Continued I		Ε)		
1204 86	2204	43	**Reissue inc	depende	nt claims	1802	900	1802	900	Request for expedited				
1205 18	2205	over original patent 9 **Reissue claims in excess of 20 and over original patent 1502 500 1002 500 of a design application												
SUBTOTAL (2) (\$) 0			Other	fee (spe	cify)									
** or number previously paid, if greater; For Reissues, see above		*Reduced by Basic Filing Fee Paid			Fee Paid	SUBTOTAL (3) (\$) 40								
SUBMITTED BY										Complete (if a			=	
1302 200			Re	gistration	No.				1751					
Name (Print/Type) DAVID G. POSZ				thorney/An		37.70	01	Telephone	170317	07-9110				

March 30, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 37 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 (1-800-786-9199) and select option 2.